									Application or Docket Number					
PATENT APPLICATION . LE DETERMINATION RECORD														
Effective October 1, 2001														
CLAIMS AS EUED DADT I														
	CLAIMS AS FILED - PART I								YTITY		OTHER	THAN		
TOTAL CLARAC			(Column 1)		(Column 2)			TYPE		OR	SMALL	ENTITY		
TOTAL CLAIMS								RATE	FEE	1	RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	•	1	BASIC FEE	·		
TOTAL CHARGEABLE CLAIMS			10							OR				
TOTAL CHARGEABLE CLAIMS			mir	minus 20=		*		X\$ 9=		OR	X\$18=			
INDEPENDENT CLAIMS			/ minus 3 =		*			X42=		1	V04			
MULTIPLE DEPENDENT CLAIM P			RESENT					A42=		OR	X84=	~		
								+140=		OR	+280=	1.		
* If	the difference	in column 1 is	less than ze	ero, entei	r "0" in c	olumn 2		TOTAL		```				
			MENDED - PART II				TOTAL		OR	TOTAL				
	C					OTHER								
<u> </u>		(Column 1) CLAIMS		(Column 2) (Column 3)				SMALL	ENTITY	OR.	SMALL	ENTITY		
₹		REMAINING		NUM		PRESENT			ADDI-			ADDI-		
Σ		AFTER AMENDMENT		PREVI		EXTRA	RATE	TIONAL FEE.	٠	RATE	TIONAL			
Ē	Total	. 1.7	Minus		<u> </u>		l		1			FEE		
		<u> </u>		**~	/	=	Ιl	X\$ 9=		OR	X\$18=			
AMENDMENT A	Independent	*	Minus	***	2			X42=		OR	X84=			
	FIRST PRESE	NTATION OF M	IULTIPLE DEF	PENDENT	CLAIM		 	-						
	,							+140 ≐ .	/ /	OR	+280=			
	(1)						TOTAL		OR	TOTAL				
1	ke/	(Column 1)	,	(Colui	mn (1)	(Caluman a)		VDDIT. FEE	· · · · ·	JO	ADDIT. FEE			
4		CLAIMS		HIGH		(Column 3)	1 r	· · · · ·	4.221					
MENT B		REMAINING AFTER		NUM PREVK		PRESENT		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL		
<u>o</u>		AMENDMENT		PAID		EXTRA] [FEE	/_	MIL	FEE		
AMENDA	Total	* - ノ つ -	Minus	** %	20	=	1 [X\$ 9=		OR	X\$18=	-		
	Independent	. /	Minus	***	~	=	1		/	OH	740-	/		
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT				T CI AIM		1 [X42=	· /	OR	X84=			
	The state of the s										+280=	/ .		
		•					E	+140=	_/	OR				
		•				•	-	TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE			
		(Column 1)	<u> </u>	(Colu	mn 2)	(Column 3)								
ပ		CLAIMS REMAINING		HIGH NUM	IEST		1 г		ADDI-			ADDI-		
Ę		AFTER		PREVI	OUSLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL		
Z.		AMENDMENT		PAID	FOR	 1	┨╏		FEE			FEE		
ENDMENT C	Total	* 10	Minus	** 6	ע	=] [X\$ 9=		OR	X\$18=	/ .		

Independent Minus FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

OR

OR

+280

TOTAL ADDIT. FEE

X42=

+140=

^{*} If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.